

Appendix A - Extension to Deed of Grant

Full name of purchaser(s): This will be the existing Grave Grant Owner.

Title _____ Full Name _____

Address _____

_____ Postcode _____

Telephone Number _____ Email _____

I wish to extend the Rights to the above-mentioned grave for _____ years.

I have read and understood the cemetery rules and regulations. I acknowledge that the renewal of this Deed is for the period requested not exceeding 50 years and is subject to payment of the appropriate fee. I hereby indemnify Stamford Town Council and all its officers and servants from any liability whatsoever in this matter or arising thereof. I hereby declare that as the registered owner to be legally bound by the Rules and Regulations and any further amendments as result of legislative changes. I have been made aware to the Council's Privacy Notice for Bereavement Services.

Signature _____ Date _____

Full name of purchaser(s): This will be the existing Grave Grant Owner.

Title _____ Full Name _____

Address _____

_____ Postcode _____

Telephone Number _____ Email _____

I wish to extend the Rights to the above-mentioned grave for _____ years.

I have read and understood the cemetery rules and regulations. I acknowledge that the renewal of this Deed is for the period requested not exceeding 50 years and is subject to payment of the appropriate fee. I hereby indemnify Stamford Town Council and all its officers and servants from any liability whatsoever in this matter or arising thereof. I hereby declare that as the registered owner to be legally bound by the Rules and Regulations and any further amendments as result of legislative changes. I have been made aware to the Council's Privacy Notice for Bereavement Services.

Signature _____ Date _____

Approved: STC 28th February 2023

